

LIST OF GRANTEES (5 Grantees)					
Grantee Name	City	State	Tracking Number	BHCMIS ID	Funding Streams
COLUMBIA ROAD HEALTH SERVICES	WASHINGTON	DC	H80CS002892009	037680	CH
COMMUNITY OF HOPE	WASHINGTON	DC	H80CS066722009	0318420	CH
LA CLINICA DEL PUEBLO	WASHINGTON	DC	H80CS082442009	036820	CH
MARY'S CENTER FOR MATERNAL & CHILD CARE INC	WASHINGTON	DC	H80CS042022009	037030	CH
UNITY HEALTH CARE, INC.	WASHINGTON	DC	H80CS000702009	037020	CH,HCH

TABLE 3A - Patients by Age and Gender - 2009
State - Universal - 5 Grantees

Age Groups		Male Patients (a)	Female Patients (b)	All Patients
Number of Patients				
1.	Under Age 1	1,727	1,761	3,488
2.	Age 1	985	1,038	2,023
3.	Age 2	816	805	1,621
4.	Age 3	720	703	1,423
5.	Age 4	561	666	1,227
6.	Age 5	482	533	1,015
7.	Age 6	484	474	958
8.	Age 7	431	498	929
9.	Age 8	435	419	854
10.	Age 9	404	413	817
11.	Age 10	389	383	772
12.	Age 11	378	372	750
13.	Age 12	376	358	734
14.	Age 13	332	396	728
15.	Age 14	349	469	818
16.	Age 15	345	475	820
17.	Age 16	457	604	1,061
18.	Age 17	472	784	1,256
19.	Age 18	642	923	1,565
20.	Age 19	720	996	1,716
Subtotal Patients (sum lines 1-20)		11,505	13,070	24,575
21.	Age 20	774	1,031	1,805
22.	Age 21	746	1,171	1,917
23.	Age 22	922	1,426	2,348
24.	Age 23	912	1,570	2,482
25.	Age 24	932	1,463	2,395
26.	Ages 25 - 29	4,742	6,758	11,500
27.	Ages 30 - 34	3,912	5,162	9,074
28.	Ages 35 - 39	3,904	4,370	8,274
29.	Ages 40 - 44	4,983	4,388	9,371
30.	Ages 45 - 49	5,458	4,528	9,986
31.	Ages 50 - 54	4,801	3,961	8,762
32.	Ages 55 - 59	3,190	2,916	6,106
33.	Ages 60 - 64	1,762	2,059	3,821
Subtotal Patients (sum lines 21-33)		37,038	40,803	77,841
34.	Ages 65 - 69	941	1,296	2,237
35.	Ages 70 - 74	505	756	1,261
36.	Ages 75 - 79	186	401	587
37.	Ages 80 - 84	91	238	329
38.	Ages 85 and over	62	207	269
Subtotal Patients (sum lines 34-38)		1,785	2,898	4,683
39.	Total Patients (sum lines 1-38)	50,328	56,771	107,099
% of Total		47.0%	53.0%	

TABLE 3B - Patients by Hispanic or Latino Identity / Race / Language - 2009
State - Universal - 5 Grantees

PATIENTS BY RACE		PATIENTS BY HISPANIC OR LATINO IDENTITY						
		Hispanic/Latino (a)	Non-Hispanic/Latino (b)	Unreported/Refused to Report (c)		Total (d)		
				Number	% of Total	Number	% of Total	% of Known
Number of Patients								
1.	Asian	37	841			878	0.8%	1.1%
2a.	Native Hawaiian	15	5			20	0.0%	0.0%
2b.	Other Pacific Islander	1,249	1			1,250	1.2%	1.6%
2.	Total Hawaiian/Pacific Islander (Sum lines 2a+2b)	1,264	6			1,270	1.2%	1.6%
3.	Black/African American	933	66,733			67,666	63.2%	86.1%
4.	American Indian/Alaska native	167	144			311	0.3%	0.4%
5.	White	5,132	1,691			6,823	6.4%	8.7%
6.	More than one race	1,002	602			1,604	1.5%	2.0%
6a.	Total Known (Sum lines 1+2+3+4+5+6)	8,535	70,017			78,552		
7.	Unreported/Refused to report	22,160	2,232	4,155	3.9%	28,547	26.7%	
8.	Total Patients(Sum lines 1+2+3 to 7)	30,695	72,249	4,155	3.9%	107,099	100.0%	100.0%
9.	Total Patients	29.8%	70.2%					

PATIENTS BY LANGUAGE	Number (a)	% of Total
Number of Patients		
12. Patients best served in a language other than English	31,432	29.3%

% may not equal 100% due to rounding

TABLE 4 - Selected Patient Characteristics - 2009
State - Universal - 5 Grantees

Characteristic		Number of Patients (a)	% of Total	% of Known		
Income as Percent of Poverty Level						
1.	100% and Below	51,627	48.2%	79.7%		
2.	101 - 150%	7,786	7.3%	12.0%		
3.	151 - 200%	4,765	4.4%	7.4%		
4.	Over 200%	619	0.6%	1.0%		
5.	Unknown	42,302	39.5%			
6.	Total (sum lines 1-5)	107,099	100.0%			
Principal Third Party Medical Insurance Source		Ages 0 - 19 (a)	Ages 20+ (b)	TOTAL	%	
7.	None/Uninsured	5,541	20,331	25,872	24.2%	
8a.	Regular Medicaid (Title XIX)	17,954	19,114	37,068	34.6%	
8b.	CHIP Medicaid	0	0	0	0.0%	
8.	Total Medicaid (Sum lines 8a+8b)	17,954	19,114	37,068	34.6%	
9.	Medicare (Title XVIII)	0	4,636	4,636	4.3%	
10a.	Other Public Insurance Non-CHIP	440	36,414	36,854	34.4%	
10b.	Other Public Insurance CHIP	0	0	0	0.0%	
10.	Total Public Insurance (Sum lines 10a+10b)	440	36,414	36,854	34.4%	
11.	Private Insurance	640	2,029	2,669	2.5%	
12.	Total (Sum Lines 7+8+9+10+11)	24,575	82,524	107,099	100.0%	
Managed Care Utilization						
Payor Category		Medicaid (a)	Medicare (b)	Other Public Including Non- Medicaid CHIP (c)	Private (d)	Total (e)
13a.	Capitated Member months	181,257	0	0	996	182,253
13b.	Fee-for-service Member months	152,418	4,464	13,259	3,861	174,002
13c.	Total Member Months (Sum lines 13a+13b)	333,675	4,464	13,259	4,857	356,255
Characteristics - Special Populations			Number of Patients (a)	%		
14.	Migrant (330g grantees Only)		0			
15.	Seasonal (330g grantees Only)		0			
	Migrant/Seasonal (non-330 g grantees)		0	-		
16.	Total Migrant/Seasonal Agricultural Worker or Dependent (All Grantees Report This Line)		0	-		
17.	Homeless Shelter (330h grantees Only)		2,864			
18.	Transitional (330h grantees Only)		788			
19.	Doubling Up (330h grantees Only)		281			
20.	Street (330h grantees Only)		239			
21.	Other (330h grantees Only)		1,796			
22.	Unknown (330h grantees Only)		2,375			
	Homeless (non-330 h grantees)		319	3.7%		
23.	Total Homeless (All Grantees Report This Line)		8,662	100.0%		
24.	Total School Based Health Center Patients (All Grantees Report This Line)		523			
25.	Total Veterans (All Grantees Report this Line)		964			

% may not equal 100% due to rounding

TABLE 5 - Staffing and Utilization - 2009
State - Universal - 5 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs (a)	Clinic Visits (b)	Patients (c)
1.	Family Physicians	42.65	139,812	
2.	General Practitioners	1.60	6,062	
3.	Internists	27.16	93,323	
4.	Obstetrician/Gynecologists	4.79	13,941	
5.	Pediatricians	7.89	27,207	
7.	Other Specialty Physicians	6.07	18,834	
8.	Total Physicians (Sum lines 1-7)	90.16	299,179	
9a.	Nurse Practitioners	23.54	57,953	
9b.	Physician Assistants	14.01	35,846	
10.	Certified Nurse Midwives	10.09	23,646	
10a.	Total Mid-Levels (Sum lines 9a-10)	47.64	117,445	
11.	Nurses	138.95	77,979	
12.	Other Medical Personnel	174.67		
13.	Laboratory Personnel	4.16		
14.	X-Ray Personnel	5.29		
15.	Total Medical Services (Sum lines 8+10a through 14)	460.87	494,603	103,800
16.	Dentists	14.70	32,213	
17.	Dental Hygienists	1.66	1,185	
18.	Dental Assistants, Aides, Techs	23.75		
19.	Total Dental Services (Sum lines 16-18)	40.11	33,398	14,926
20a.	Psychiatrists	7.52	20,109	
20a1.	Licensed Clinical Psychologists	0.00	0	
20a2.	Licensed Clinical Social Workers	7.01	4,629	
20b.	Other Licensed Mental Health Providers	3.56	2,699	
20c.	Other Mental Health Staff	9.92	20,401	
20.	Total Mental Health Services (Sum lines 20a-20c)	28.01	47,838	14,414
21.	Substance Abuse Services	2.85	3,949	330
22.	Other Professional Services	4.30	9,694	3,564
23.	Pharmacy Personnel	48.91		
24.	Case Managers	55.52	52,811	
25.	Patient/Community Education Specialists	27.09	6,826	
26.	Outreach Workers	39.33		
27.	Transportation Staff	2.00		
27a.	Eligibility Assistance Workers	6.95		
27b.	Interpretation Staff	1.44		
28.	Other Enabling Services	1.14		
29.	Total Enabling Services (Sum lines 24-28)	133.47	59,637	29,078
29a.	Other Programs/Services	72.60		
30a.	Management and Support Staff	117.14		
30b.	Fiscal and Billing Staff	46.66		
30c.	IT Staff	8.60		
30.	Total Administrative Staff (Sum lines 30a-30c)	172.40		
31.	Facility Staff	31.64		
32.	Patient Support Staff	157.99		
33.	Total Administrative & Facility (Sum lines 30-32)	362.03		
34.	Total (Sum lines 15+19+20+21+22+23+29+29a+33)	1,153.15	649,119	

Visits are shown only for personnel that generate reportable visits
Subtotals may differ from the sum of cells due to rounding

TABLE 5 - Staffing and Utilization - 2009
State - Universal - 5 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Visits	
		% Group	% Total	% Group	% Total
1.	Family Physicians	9.3%	3.7%	28.3%	21.5%
2.	General Practitioners	0.3%	0.1%	1.2%	0.9%
3.	Internists	5.9%	2.4%	18.9%	14.4%
4.	Obstetrician/Gynecologists	1.0%	0.4%	2.8%	2.1%
5.	Pediatricians	1.7%	0.7%	5.5%	4.2%
7.	Other Specialty Physicians	1.3%	0.5%	3.8%	2.9%
8.	Total Physicians (Sum lines 1-7)	19.6%	7.8%	60.5%	46.1%
9a.	Nurse Practitioners	5.1%	2.0%	11.7%	8.9%
9b.	Physician Assistants	3.0%	1.2%	7.2%	5.5%
10.	Certified Nurse Midwives	2.2%	0.9%	4.8%	3.6%
10a.	Total Mid-Levels (Sum lines 9a-10)	10.3%	4.1%	23.7%	18.1%
11.	Nurses	30.1%	12.0%	15.8%	12.0%
12.	Other Medical Personnel	37.9%	15.1%		
13.	Laboratory Personnel	0.9%	0.4%		
14.	X-Ray Personnel	1.1%	0.5%		
15.	Total Medical (Sum lines 8+10a through 14)	100.0%	40.0%	100.0%	76.2%
16.	Dentists	36.6%	1.3%	96.5%	5.0%
17.	Dental Hygienists	4.1%	0.1%	3.5%	0.2%
18.	Dental Assistance,Aides,Techs	59.2%	2.1%		
19.	Total Dental Services (Sum lines 16-18)	100.0%	3.5%	100.0%	5.1%
20a.	Psychiatrists	26.8%	0.7%	42.0%	3.1%
20a1.	Licensed Clinical Psychologists	0.0%	0.0%	0.0%	0.0%
20a2.	Licensed Clinical Social Workers	25.0%	0.6%	9.7%	0.7%
20b.	Other Licensed Mental Health Providers	12.7%	0.3%	5.6%	0.4%
20c.	Other Mental Health Staff	35.4%	0.9%	42.6%	3.1%
20.	Mental Health (Sum lines 20a-c)	100.0%	2.4%	100.0%	7.4%
21.	Substance Abuse Services	100.0%	0.2%	100.0%	0.6%
22.	Other Professional Services	100.0%	0.4%	100.0%	1.5%
23.	Pharmacy Personnel	100.0%	4.2%		
24.	Case Managers	41.6%	4.8%	88.6%	8.1%
25.	Patient/Community Education Specialists	20.3%	2.3%	11.4%	1.1%
26.	Outreach Workers	29.5%	3.4%		
27.	Transportation Staff	1.5%	0.2%		
27a.	Eligibility Assistance Workers	5.2%	0.6%		
27b.	Interpretation Staff	1.1%	0.1%		
28.	Other Enabling Services	0.9%	0.1%		
29.	Total Enabling Services (Sum lines 24-28)	100.0%	11.6%	100.0%	9.2%
29a.	Other Programs/Services	100.0%	6.3%		

Clinic visits are shown only for personnel that generate reportable visits
Subtotals may differ from the sum of cells due to rounding
% may not equal 100% due to rounding

TABLE 5 - Staffing and Utilization - 2009
State - Universal - 5 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Visits	
		% Group	% Total	% Group	% Total
30a.	Management and Support Staff	32.4%	10.2%		
30b.	Fiscal and Billing Staff	12.9%	4.0%		
30c.	IT Staff	2.4%	0.7%		
30.	Total Administrative Staff (Sum lines 30a-30c)	47.6%	15.0%		
31.	Facility Staff	8.7%	2.7%		
32.	Patient Support Staff	43.6%	13.7%		
33.	Total Administrative & Facility (Sum lines 30-32)	100.0%	31.4%		
34.	Total (Sum lines 15+19+20+21+22+23+29+29a+33)		100.0%		100.0%

Clinic Visits are shown only for personnel that generate reportable visits
Subtotals may differ from the sum of cells due to rounding
% may not equal 100% due to rounding

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 5 Grantees

Diagnostic Category		Applicable ICD - 9 - CM Codes	Number of Visits by Primary Diagnosis (a)	Number of Patients with Primary Diagnosis (b)	Visits Per Patient
Selected Infectious and Parasitic Diseases					
1.	Symptomatic HIV	042; 079.53	12,001	2,217	5.41
2.	Asymptomatic HIV	V08	12,937	2,174	5.95
3.	Tuberculosis	010.xx - 018.xx	505	276	1.83
4.	Syphilis and other sexually transmitted diseases	090.xx - 099.xx	15,796	2,535	6.23
Selected Diseases of the Respiratory System					
5.	Asthma	493.xx	19,977	6,666	3.00
6.	Chronic bronchitis and Emphysema	490.xx - 492.xx	916	373	2.46
Selected Other Medical Conditions					
7.	Abnormal Breast Findings,Female	174.xx; 198.81; 233.0x; 238.3; 793.8x	2,649	779	3.40
8.	Abnormal Cervical Findings	180.xx; 198.82; 233.1x; 795.0x	3,576	1,163	3.07
9.	Diabetes Mellitus	250.xx; 648.0x; 775.1x;	32,762	6,758	4.85
10.	Heart Disease (selected)	391.xx - 392.0x 410.xx - 429.xx	9,499	1,780	5.34
11.	Hypertension	401.xx - 405.xx;	42,280	13,977	3.02
12.	Contact Dermatitis and other Eczema	692.xx	7,645	4,586	1.67
13.	Dehydration	276.5x	147	76	1.93
14.	Exposure to Heat or Cold	991.xx - 992.xx	138	14	9.86
14a.	Overweight and obesity	ICD-9 : 278.0 – 278.02 or V85.xx (Excluding V85.0, V85.1, V85.51 V85.52)	19,075	5,152	3.70
Selected Childhood Conditions					
15.	Otitis Media and Eustachian Tube Disorders	381.xx - 382.xx	3,005	1,836	1.64
16.	Selected Perinatal Medical Conditions	770.xx; 771.xx; 773.xx; 774.xx - 779.xx (Excluding 779.3x)	187	118	1.58
17.	Lack of Expected Normal Physiological Development (Such as delayed milestone;Failure to gain weight;Failure to thrive)-does not include sexual or mental development;Nutritional Deficiencies	260.xx - 269.xx; 779.3x; 783.3x - 783.4x;	1,935	1,243	1.56

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 5 Grantees

Diagnostic Category		Applicable ICD - 9 - CM Codes	Number of Visits by Primary Diagnosis (a)	Number of Patients with Primary Diagnosis (b)	Visits Per Patient
Selected Mental Health and Substance Abuse Conditions					
18.	Alcohol Related Disorders	291.xx; 303.xx; 305.0x; 357.5x	4,145	2,178	1.90
19.	Other Substance Related Disorders (Excludes Tobacco Use Disorders)	292.1x - 292.8x; 304.xx; 305.2x - 305.9x; 357.6x; 648.3x	7,417	4,951	1.50
19a.	Tobacco Use Disorders	305.1	2,066	1,763	1.17
20a.	Depression and Other Mood Disorders	296.xx; 300.4 301.13; 311.xx	7,651	2,690	2.84
20b.	Anxiety Disorders Including PTSD	300.0x; 300.2x; 300.3; 308.3; 309.81;	3,675	1,329	2.77
20c.	Attention Deficit and Disruptive Behavior Disorders	312.8x; 312.9x; 313.81; 314.xx	753	296	2.54
20d.	Other Mental Disorders, Excluding Drug or Alcohol Dependence (includes mental retardation)	290.xx; 293.xx - 302.xx (Excluding 296.xx; 300.0x; 300.2x; 300.3; 300.4; 301.13); 306.xx - 319.xx (Excluding 308.3; 309.81; 311.xx; 312.8x; 312.9x; 313.81; 314.xx)	7,857	4,605	1.71

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 5 Grantees

Service Category		Applicable ICD - 9 - CM Codes	Number of Visits (a)	Number of Patients (b)	Visits Per Patient
Selected Diagnostic Tests/Screening/Preventive Services					
21.	HIV Test	CPT - 4: 86689; 86701 - 86703; 87390 - 87391	28,853	21,727	1.33
22.	Mammogram	CPT-4: 77052, 77057 OR ICD-9: V76.11; V76.12	594	574	1.03
23.	Pap Test	CPT - 4: 88141 - 88155; 88164 - 88167; 88174 - 88175 OR ICD - 9: V72.3; V72.31; V76.2	13,432	12,880	1.04
24.	Selected Immunizations (Hepatitis A, Hemophilus Influenza B (HiB), Influenza virus, Pneumococcal Diptheria, Tetanus, Pertussis (DTaP) (DTP) (DT), Mumps, Measles, Rubella, Poliovirus, Varicella, Hepatitis B Child)	CPT - 4: 90633 - 90634, 90645 - 90648; 90669; 90696 - 90702; 90704 - 90716; 90718 - 90723; 90743 - 90744; 90748	19,044	14,655	1.30
24a.	Seasonal Flu Vaccine	CPT-4: 90655 - 90662	20,140	18,890	1.07
24b.	H1N1 Flu Vaccine	CPT-4: 90663; 90470	5,316	5,140	1.03
25.	Contraceptive Management	ICD - 9: V25.xx CPT - 4: 99391 - 99393;	16,387	10,196	1.61
26.	Health Supervision of Infant or Child (ages 0 through 11)	CPT - 4: 99381 - 99383;	20,639	14,135	1.46
26a.	Childhood lead test screening (Ages 9 to 72 months)	CPT-4: 83655	1,997	1,853	1.08
26b.	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	CPT-4: 99408-99409	0	0	-
26c.	Smoke and tobacco use cessation counseling	CPT-4: 99406 and 99407; S9075	169	161	1.05

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 5 Grantees

Service Category		Applicable ADA Code	Number of Visits (a)	Number of Patients (b)	Visits Per Patient
Selected Dental Services					
27.	I. Emergency Services	ADA: D9110	5,182	3,882	1.33
28.	II. Oral Exams	ADA: D0120, D0140, D0145, D0150, D0160, D0170, D0180	14,125	11,352	1.24
29.	Prophylaxis - Adult or Child	ADA: D1110, D1120	4,629	3,906	1.19
30.	Sealants	ADA: D1351	1,174	459	2.56
31.	Fluoride Treatment - adult or child	ADA: D1203, D1204, D1206	1,077	959	1.12
32.	III. Restorative Services	ADA: D21xx - D29xx	7,004	3,565	1.96
33.	IV. Oral Surgery (Extractions and other Surgical Procedures)	ADA: D7111, D7140, D7210, D7220, D7230, D7240, D7241, D7250, D7260, D7261, D7270, D7272, D7280	4,731	3,312	1.43
34.	V. Rehabilitation Services (Endo,Perio,Prosthodontics,Orthodontics)	ADA: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	3,683	2,699	1.36

TABLE 6B - Quality of Care Indicators - 2009
State - Universal - 5 Grantees

SECTION A - AGE CATEGORIES FOR PRENATAL PATIENTS (GRANTEES WHO PROVIDE PRENATAL CARE ONLY)				
DEMOGRAPHIC CHARACTERISTICS OF PRENATAL CARE PATIENTS				
AGE		Number of Patients (a)		Percent
1.	Less than 15 Years		11	0.2%
2.	Ages 15 - 19		533	11.4%
3.	Ages 20 - 24		1,330	28.5%
4.	Ages 25 - 44		2,758	59.2%
5.	Ages 45 and Over		27	0.6%
6.	Total Patients (Sum lines 1-5)		4,659	100.0%

SECTION B - TRIMESTER OF ENTRY INTO PRENATAL CARE						
Trimester of First Known Visit for Women Receiving Prenatal Care During Reporting Year		Women Having First Visit with Grantee		Women Having First Visit with Another Provider		% Total
		(a)	%	(b)	%	
7.	First Trimester	2,939	63.1%	19	0.4%	63.5%
8.	Second Trimester	1,441	30.9%	21	0.5%	31.4%
9.	Third Trimester	239	5.1%	0	0.0%	5.1%

SECTION C - CHILDHOOD IMMUNIZATION RATE				
Childhood Immunization Rate		Total Number Patients with 2nd Birthday During Measurement Year (a)	Estimated number patients immunized (b)	Estimated % patients immunized (c)
10.	Number of children who have received required vaccines who had their 2nd birthday during measurement year	1,778	1,477	83.1%

SECTION D - PAP TEST				
Pap Test		Total Number of Female Patients 24-64 Years of Age (a)	Estimated number patients tested (b)	Estimated % patients tested (c)
11.	Number of female patients aged 24-64 who had at least one PAP test performed during the measurement year or during one of the previous two years	34,008	29,494	86.7%

% may not equal 100% due to rounding

The childhood immunization and Pap test rates are based on the total of the estimated number of patients tested or immunized for each health center divided by the total number patients in the applicable category (i.e., the universe) for each measure.

TABLE 7 - Health Outcomes and Disparities - 2009
State - Universal - 5 Grantees

Total (i)								
HIV Positive Pregnant Women		58						
		100.0%						
Section A: DELIVERIES AND BIRTH WEIGHT								
	Prenatal care patients who delivered during the year		Deliveries performed by Grantee Provider		Live Births < 1500 grams	Live Births 1500-2499 grams	Live Births >= 2500 grams	% Low and Very Low Birth Weight
By Race								
Asian (a)	163	6.9%			2	7	155	5.5%
Native Hawaiian (b1)	0	0.0%			0	0	0	-
Pacific Islander (b2)	0	0.0%			0	0	0	-
Black/ African American (c)	989	41.8%			19	88	913	10.5%
American Indian/ Alaska Native (d)	3	0.1%			0	1	3	25.0%
White (e)	260	11.0%			1	32	226	12.7%
More than one race (f)	46	1.9%			0	0	45	0.0%
Race Unreported/ Refused to Report (g)	705	29.8%			5	18	680	3.3%
Sub-total (Sum a+b1+b2+c+d+e+f+g)	2,166	91.5%			27	146	2,022	7.9%
By Hispanic/Latino Identity								
Hispanic/Latino (c1)	841	35.5%			6	37	795	5.1%
Non-Hispanic/Latino (c2)	1,325	56.0%			21	109	1,227	9.6%
Sub-total (Sum c1 + c2)	2,166	91.5%			27	146	2,022	7.9%
Unreported / Refused to Report Race and Ethnicity (h)	201	8.5%			1	13	187	7.0%
Total (i)	2,367	100.0%	1,376	100.0%	28	159	2,209	7.8%

* % shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places

TABLE 7 - Health Outcomes and Disparities - 2009
State - Universal - 5 Grantees

SECTION B: HYPERTENSION		
Patients 18 to 85 diagnosed with hypertension whose last blood pressure was less than 140/90		
	Total hypertensive patients	Estimated % Patients with Controlled Blood Pressure
By Race		
Asian (a)	112	
Native Hawaiian (b1)	0	
Pacific Islander (b2)	0	
Black/ African American (c)	14,116	
American Indian/ Alaska Native (d)	41	
White (e)	780	
More than one race (f)	94	
Race Unreported/ Refused to Report (g)	1,579	
Sub-total (Sum a+b1+b2+c+d+e+f+g)	16,722	
By Hispanic/Latino Identity		
Hispanic/Latino (c1)	2,100	
Non-Hispanic/Latino (c2)	14,622	
Sub-total (Sum c1 + c2)	16,722	
Unreported / Refused to Report Race and Ethnicity (h)	289	
Total (i)	17,011	51.3%

* % shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places

** % by race are low estimates, not adjusted at the grantee level for samples with zero patients in racial categories.

TABLE 7 - Health Outcomes and Disparities - 2009
State - Universal - 5 Grantees

SECTION C: DIABETES			
Patients 18 to 75 diagnosed with Type I or Type II diabetes: Most recent test results			
	Total patients with diabetes	Estimated % Patients with Hba1c <= 9%	Estimated % Patients with Hba1c < 7%
By Race			
Asian (a)	54		
Native Hawaiian (b1)	0		
Pacific Islander (b2)	1		
Black/ African American (c)	5,803		
American Indian/ Alaska Native (d)	19		
White (e)	573		
More than one race (f)	67		
Race Unreported/ Refused to Report (g)	1,051		
Sub-total (Sum a+b1+b2+c+d+e+f+g)	7,568		
By Hispanic/Latino Identity			
Hispanic/Latino (c1)	1,466		
Non-Hispanic/Latino (c2)	6,102		
Sub-total (Sum c1 + c2)	7,568		
Unreported / Refused to Report Race and Ethnicity (h)	138		
Total (i)	7,706	75.7%	39.2%

* % shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places

** % by race are low estimates, not adjusted at the grantee level for samples with zero patients in racial categories.

TABLE 8A - Financial Costs - 2009
State - Universal - 5 Grantees

	Accrued Cost (a)	Allocation of Facility and Administration (b)	Total Cost After Allocation of Facility and Administration (c)
Financial Costs for Medical Care			
1. Medical Staff	42,904,525	20,857,916	63,762,441
2. Lab and X-ray	1,006,101	468,226	1,474,327
3. Medical/Other Direct	4,357,584	2,198,461	6,556,045
4. Total Medical Care Services (Sum lines 1-3)	48,268,210	23,524,603	71,792,813
Financial Costs for Other Clinical Services			
5. Dental	3,289,420	1,557,097	4,846,517
6. Mental Health	3,285,120	1,222,624	4,507,744
7. Substance Abuse	211,531	26,677	238,208
8a. Pharmacy not including pharmaceuticals	3,983,210	1,430,307	5,413,517
8b. Pharmaceuticals	57,502		57,502
9. Other Professional	433,533	145,855	579,388
10. Total Other Clinical Services (Sum lines 5-9)	11,260,316	4,382,560	15,642,876
Financial Costs of Enabling and Other Program Related Services			
11a. Case Management	3,112,238		3,112,238
11b. Transportation	110,631		110,631
11c. Outreach	2,664,061		2,664,061
11d. Patient and Community Education	1,577,968		1,577,968
11e. Eligibility Assistance	350,846		350,846
11f. Interpretation Services	509,724		509,724
11g. Other Enabling Services	759,315		759,315
11. Total Enabling Services Cost (Sum lines 11a-11g)	9,084,783	3,747,279	12,832,062
12. Other Related Services	4,074,291	2,195,143	6,269,434
13. Total Enabling and Other Services (Sum lines 11-12)	13,159,074	5,942,422	19,101,496
Overhead and Totals			
14. Facility	6,038,617		
15. Administration	27,810,968		
16. Total Overhead (Sum lines 14-15)	33,849,585		
17. Total Accrued Costs (Sum lines 4+10+13+16)	106,537,185		106,537,185
18. Value of Donated Facilities, Services and Supplies			528,996
19. Grand Total including Donations (Sum lines 17-18)			107,066,181

% may not equal 100% due to rounding

TABLE 8A - Financial Costs - 2009
State - Universal - 5 Grantees

Services		Direct Accrued Cost (a)		Cost (c)
		% of Category	% of Total	Includes Overhead** % of Total
Financial Costs for Medical Care				
1.	Medical Staff	88.9%	40.3%	59.8%
2.	Lab and X-ray	2.1%	0.9%	1.4%
3.	Medical/Other Direct	9.0%	4.1%	6.2%
4.	Total Medical Care Services (Sum lines 1-3)	100.0%	45.3%	67.4%
Financial Costs for Other Clinical Services				
5.	Dental	29.2%	3.1%	4.5%
6.	Mental Health	29.2%	3.1%	4.2%
7.	Substance Abuse	1.9%	0.2%	0.2%
8a.	Pharmacy not including pharmaceuticals	35.4%	3.7%	5.1%
8b.	Pharmaceuticals	0.5%	0.1%	0.1%
9.	Other Professional	3.9%	0.4%	0.5%
10.	Total Other Clinical Services (Sum lines 5-9)	100.0%	10.6%	14.7%
Financial Costs of Enabling and Other Program Related Services				
11a.	Case Management	23.7%	2.9%	2.9%
11b.	Transportation	0.8%	0.1%	0.1%
11c.	Outreach	20.2%	2.5%	2.5%
11d.	Patient and Community Education	12.0%	1.5%	1.5%
11e.	Eligibility Assistance	2.7%	0.3%	0.3%
11f.	Interpretation Services	3.9%	0.5%	0.5%
11g.	Other Enabling Services	5.8%	0.7%	0.7%
11.	Total Enabling Services Cost (Sum lines 11a-11g)	69.0%	8.5%	12.0%
12.	Other Related Services	31.0%	3.8%	5.9%
13.	Total Enabling and Other Services (Sum lines 11-12)	100.0%	12.4%	17.9%
Overhead and Totals				
14.	Facility	17.8%	5.7%	
15.	Administration	82.2%	26.1%	
16.	Total Overhead (Sum lines 14-15)	100.0%	31.8%	
17.	Total Accrued Costs (Sum lines 4+10+13+16)	100.0%	100.0%	100.0%
18.	Value of Donated Facilities, Services and Supplies (as % of direct costs - line 17)			0.5%

% may not equal 100% due to rounding

** Total Cost After Allocation of facility and Administration % of Total.

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2009
State - Universal - 5 Grantees

Payor Category		Charges			Collections			
		Full Charges This Period (a)	% of Payor	% of Total	Amount Collected This Period (b)	% of Payor	% of Total	% of Charges
1.	Medicaid Non-Managed Care	9,346,363	36.3%	10.6%	8,039,384	38.5%	12.6%	86.0%
2a.	Medicaid Managed Care (capitated)	6,788,614	26.4%	7.7%	6,099,095	29.2%	9.6%	89.8%
2b.	Medicaid Managed Care (fee-for-service)	9,610,199	37.3%	11.0%	6,721,002	32.2%	10.6%	69.9%
3.	Total Medicaid (Sum lines 1+2a+2b)	25,745,176	100.0%	29.3%	20,859,481	100.0%	32.8%	81.0%
4.	Medicare Non-Managed Care	3,201,719	97.5%	3.6%	2,329,587	95.9%	3.7%	72.8%
5a.	Medicare Managed Care (capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
5b.	Medicare Managed Care (fee-for-service)	82,703	2.5%	0.1%	100,823	4.1%	0.2%	121.9%
6.	Total Medicare (Sum lines 4+5a+5b)	3,284,422	100.0%	3.7%	2,430,410	100.0%	3.8%	74.0%
7.	Other Public including Non-Medicaid CHIP (Non Managed Care)	48,505,233	96.2%	55.3%	38,417,519	97.6%	60.4%	79.2%
8a.	Other Public including Non-Medicaid CHIP (Managed Care Capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
8b.	Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	1,939,846	3.8%	2.2%	949,859	2.4%	1.5%	49.0%
9.	Total Other Public (Sum lines 7+8a+8b)	50,445,079	100.0%	57.5%	39,367,378	100.0%	61.9%	78.0%
10.	Private Non-Managed Care	615,310	63.9%	0.7%	291,319	79.2%	0.5%	47.3%
11a.	Private Managed Care (Capitated)	25,085	2.6%	0.0%	10,419	2.8%	0.0%	41.5%
11b.	Private Managed Care (fee-for-service)	322,199	33.5%	0.4%	66,214	18.0%	0.1%	20.6%
12.	Total Private (Sum lines 10+11a+11b)	962,594	100.0%	1.1%	367,952	100.0%	0.6%	38.2%
13.	Self Pay	7,326,628	100.0%	8.3%	611,434	100.0%	1.0%	8.3%
14.	Grand Total (Sum lines 3+6+9+12+13)	87,763,899		100.0%	63,636,655		100.0%	72.5%

% may not equal 100% due to rounding

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2009
State - Universal - 5 Grantees

Payor Category	Retroactive Settlements, Receipts, and Paybacks (c)						Allowances	
	Collection of recon./wrap around Current Year (c1)	Collection of recon./wrap around Previous Years (c2)	Collection of other retroactive payments (c3)	Penalty/ Payback (c4)	Net Retros	Net Retros % of Charges	Allowances (d)	Allowances % of Charges
1. Medicaid Non-Managed Care	28,479	0		0	28,479	0.3%	1,594,749	17.1%
2a. Medicaid Managed Care (capitated)	616,096	1,397,979	0	0	2,014,075	29.7%	689,519	10.2%
2b. Medicaid Managed Care (fee-for-service)	1,054,556	2,177,533	0	0	3,232,089	33.6%	3,336,020	34.7%
3. Total Medicaid (Sum lines 1+2a+2b)	1,699,131	3,575,512	0	0	5,274,643	20.5%	5,620,288	21.8%
4. Medicare Non-Managed Care	0	19,000		2,005	16,995	0.5%	917,631	28.7%
5a. Medicare Managed Care (capitated)	0	0	0	0	0	-	0	-
5b. Medicare Managed Care (fee-for-service)	0	0	0	0	0	0.0%	-24,388	-29.5%
6. Total Medicare (Sum lines 4+5a+5b)	0	19,000	0	2,005	16,995	0.5%	893,243	27.2%
7. Other Public including Non-Medicaid CHIP (Non Managed Care)	0	0		0	0	0.0%	9,318,412	19.2%
8a. Other Public including Non-Medicaid CHIP (Managed Care Capitated)	0	0	0	0	0	-	0	-
8b. Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	0	0	0	0	0	0.0%	589,953	30.4%
9. Total Other Public (Sum lines 7+8a+8b)	0	0	0	0	0	0.0%	9,908,365	19.6%

% may not equal 100% due to rounding

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2009
State - Universal - 5 Grantees

Payor Category	Retroactive Settlements, Receipts, and Paybacks (c)						Allowances	
	Collection of recon./wrap around Current Year (c1)	Collection of recon./wrap around Previous Years (c2)	Collection of other retroactive payments (c3)	Penalty/ Payback (c4)	Net Retros	Net Retros % of Charges	Allowances (d)	Allowances % of Charges
10. Private Non-Managed Care				0	0	0.0%	237,337	38.6%
11a. Private Managed Care (Capitated)			0	0	0	0.0%	14,666	58.5%
11b. Private Managed Care (fee-for-service)			0	0	0	0.0%	93,992	29.2%
12. Total Private (Sum lines 10+11a+11b)			0	0	0	0.0%	345,995	35.9%
13. Self Pay								
14. Grand Total (Sum lines 3+6+9+12+13)	1,699,131	3,594,512	0	2,005	5,291,638	6.0%	16,767,891	19.1%

13. Self Pay	Sliding Discounts (e)	Bad Debt Write Off (f)
	4,502,672	2,111,495

% may not equal 100% due to rounding

TABLE 9E -Other Revenues - 2009
State - Universal - 5 Grantees

Source	Amount (a)	% Group Total
BPHC Grants (Enter Amount Drawn Down - Consistent with PMS-272)		
1a. Migrant Health Center	0	0.0%
1b. Community Health Center	6,202,870	65.4%
1c. Health Care for the Homeless	3,276,989	34.6%
1e. Public Housing Primary Care	0	0.0%
1g. Total Health Center Cluster (Sum lines 1a through 1e)	9,479,859	100.0%
1j. Capital Improvement Program Grants	0	0.0%
1. Total BPHC Grants (Sum lines 1g+1h+1i+1j)	9,479,859	100.0%
Other Federal Grants		
2. Ryan White Part C HIV Early Intervention	617,546	9.6%
3. Other Federal Grants	4,619,723	71.8%
4. American Recovery and Reinvestment Act (ARRA) New Access Point (NAP) and Increased Demand for Services (IDS)	575,830	9.0%
4a. American Recovery and Reinvestment Act (ARRA) Capital Improvement Project (CIP) and Facility Investment Program (FIP)	618,099	9.6%
5. Total Other Federal Grants (Sum Lines 2-4a)	6,431,198	100.0%
Non-Federal Grants Or Contracts		
6. State Government Grants and Contracts	6,263,808	25.4%
6a. State/Local Indigent Care Programs	69,936	0.3%
7. Local Government Grants and Contracts	11,824,438	47.9%
8. Foundation/Private Grants and Contracts	6,536,575	26.5%
9. Total Non-Federal Grants Or Contracts (Sum lines 6+6a+7+8)	24,694,757	100.0%
10. Other Revenue (Non-patient related revenue not reported elsewhere)	2,954,618	100.0%
11. Grand Total Revenue (Sum lines 1+5+9+10)	43,560,432	

% may not equal 100% due to rounding